

**TOWN OF BUENA VISTA**  
**APPLICATION FOR ZONE DISTRICT CHANGE**  
**Code Section – Article I, Section 16-6**

**For Town Use Only**

Date App. Received: \_\_\_\_\_

Fee \$: \_\_\_\_\_

Deposit Paid \$: \_\_\_\_\_

**Important - Please Read The Following Information Carefully**

*It is the applicant's responsibility to obtain, read and understand all of the relevant sections of the Buena Vista Municipal Code applicable to this procedure. Please keep in mind that more than one section of the code may apply to your application. These regulations are available through the Town of Buena Vista municipal offices at a nominal cost. If you do not understand portions of the Code concerning your application, please ask questions. Failure to complete the application, submit all of the required materials or answer questions completely and accurately may result in a delay and processing or a rejection of the application as incomplete. All fees must be paid in full at the time of application. Public meetings or public hearings will not be scheduled for an application until it is deemed complete by the Town. Each applicant should take the time necessary to submit a complete and comprehensive application. Town staff is available to direct the applicant to appropriate sources of information.*

**APPLICANT**

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Owner ☐ Agent ☐

Mailing Address: \_\_\_\_\_

Mailing Address for Notices, if different from above: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

**PROPERTY SUBJECT TO APPLICATION**

Street Address: \_\_\_\_\_

Practical Property Description: \_\_\_\_\_

Legal Description (may attach): \_\_\_\_\_

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Acreage or Square Feet of Parcel: \_\_\_\_\_ Existing Zoning: \_\_\_\_\_

Surrounding Zoning – North: \_\_\_\_\_, South: \_\_\_\_\_, East: \_\_\_\_\_, West: \_\_\_\_\_,

Requested zoning or zone text language:

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Present Use of Subject Property: \_\_\_\_\_

Uses Surrounding Subject Parcel - North: \_\_\_\_\_, South: \_\_\_\_\_, East: \_\_\_\_\_,  
West: \_\_\_\_\_

Property owner(s) if different from applicant (inclusive of mineral owners/lessees):

Name	Mailing Address	Telephone
1.		
2.		
3.		

Attach additional sheets if necessary.

Current list of adjoining and abutting property owners to the subject parcel obtained from the Chaffee County Assessor's Office.

Name	Mailing Address	Telephone
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Attach additional sheets if necessary.

Description of Proposed Zone District Change - Text Amendment or Zone District Boundary Change (use additional sheets as necessary & include reference(s) to applicable section(s) of the municipal code).

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☐ Complete, ☐ Incomplete – Comments: \_\_\_\_\_

**The Application Shall Completely Address each of the Following Items (Attach additional sheets if necessary):**

Justification for district change. Please clearly state the basis upon which the proposed zoning change is made including a justification for the change. Examples for justification may include the following: Rezoning of subject property is in compliance with the recommendations of the comprehensive plan or the property was improperly zoned originally or there has been a substantial change in condition and use on the surrounding properties to justify a change of zoning.

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☐ Complete, ☐ Incomplete – Comments: \_\_\_\_\_

Designation of the Property in the Buena Vista Comprehensive Plan. Identify the applicable classifications or descriptions of the property and recommendations for use, density or other requirements specified in the Buena Vista Contents of Plan.

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☐ Complete, ☐ Incomplete – Comments: \_\_\_\_\_

Terms or conditions of approval applicant may deem necessary or applicable should zone change be approved (may attach additional pages).

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☐ Complete, ☐ Incomplete – Comments: \_\_\_\_\_

All information set forth above is true and accurate to the best of my information, knowledge and belief.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Additional Applicant Signature (if applicable): \_\_\_\_\_ Date: \_\_\_\_\_

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**Application Checklist**

- ☐ Application deemed complete      Date: \_\_\_\_\_ By: \_\_\_\_\_
- ☐ Vicinity map (3 copies)
- ☐ Site plan drawn to scale showing detail of proposed use, access, layout, setbacks, utilities etc. (3 copies)
- ☐ Proof of ownership (deed) for subject property.
- ☐ Written authorization from property owner(s) authorizing agent to act on their behalf (if applicable)
- ☐ List of persons entitled to receive notice of application (including name & mailing address)
- ☐ Fee
- ☐ Other \_\_\_\_\_
- ☐ Comments: \_\_\_\_\_
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Planning Commission Meeting Date: \_\_\_\_\_

Date of Planning Commission Report to Board Of Trustees: \_\_\_\_\_

Board of Trustees Public Hearing: \_\_\_\_\_

Newspaper Notice Publication Date (not less than 15 days prior to hearing): \_\_\_\_\_

Date Notice Posted on Property (not less than 10 days before the public hearing): \_\_\_\_\_

Date of individual written notice mailed by first-class mail to all owners of property abutting the parcel disregarding intervening public streets or other public rights-of-way (not less than 10 days before the hearing) or date of hand delivery (not less than 5 days prior to the hearing): \_\_\_\_\_